48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL FRIENDS OF CHRIS MCDANIEL ADDRESS (number and street) POST OFFICE BOX 125					JAN. E
					,
CITY, STATE, and ZIP CODE LAUREL		MS 3944	1		
2. NAME OF CANDIDATE CHRISTOPHER BRIAN MCDANIEL		3. OFFICE SOUGHT (States) Senate	te and District) AS 00	4. FEC IDENTIFICATION NUMBER C00550657	
5. ISTHIS AN AMENDMENT? NO, THIS IS A	NEW FILING	YES, IT AMENDS THE N	NOTICE FILED ON	6,13,	14
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
ROBERT BRUCE		BOERNE STAGE AI	RFIELD	day, year)	
100 BOERNE STAGE AIRFIELD				06/13/2014	1000.00
100 00211112 017102 71111 1220		Transaction ID : F6.3	36861		
BOERNE	TX 78006	Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	17 .0000	SMALL BUSINESS	OWNER	Date (month,	Amount
E.M. CLARK		Name of Employer RETIRED		day, year)	Amount
Z.W. OB WIK		HETHLES		06/12/2014	2600.00
3716 MAPLEWOOD AVENUE					
		Transaction ID : F6.3 Occupation	36851	-	
DALLAS	TX 75205	RETIRED			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
ERIC CLOW		HINA GROUP, INC.		day, year)	
27660 CENTRAL DRIVE				06/12/2014	1000.00
		Transaction ID : F6.	36848		
LOS ALTOS HILLS	CA 94022	Occupation]	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	OA GIOLL	CFO Name of Employer		Date (month,	Amount
LAWRENCE GELMAN		MCALLEN ANESTH	FSIA	day, year)	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		06/12/2014	1500.00
3900 SUNDOWN DRIVE					
		Transaction ID : F6.3 Occupation	36850	-	
MCALLEN	TX 78503	PHYSICIAN			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month, day, year)	Amount
RICHARD GILDER		GILDER GAGNON H	HOWE & CO LLC	day, year)	ı
1775 BORADWAY FRNT 3				06/13/2014	2400.00
•		Transaction ID : F6.8	81495		
NEW YORK	NY 10019	Occupation STOCK BROKER			
SIGNATURE (optional) MELANIE SOJOURNER			DATE 06/13/2014	Federal Ele 999 E Street, NW,	formation contact: ction Commission Washington, DC 20463 9530, Local 202-694-1100

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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED (See Reverse Side for Instructions)

SECRETARY SECTIVED
PUBLIC SELECTION

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To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL FRIENDS OF CHRIS MCD/	ANIE	L			,.
ADDRESS (number and street) POST OFFICE	BOX 12	5			
CITY, STATE, and ZIP CODE				ł	
LAUREL			MS 39441	continuation	n page
2. NAME OF CANDIDATE CHRISTOPHER BRIAN MCDANIEL			3. OFFICE SOUGHT (State and District) Senate MS 00	4. FEC IDENTIFICATION C00550657	NUMBER
5. IS THIS AN AMENDMENT? NO, THIS IS A	NEW FIL	ING	YES, IT AMENDS THE NOTICE FILED ON	//	·
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
RICHARD GILDER			GILDER GAGNON HOWE & CO LLC	day, year)	
1775 BORADWAY FRNT 3				06/13/2014	2600.00
			Transaction ID : F6.81496	<u> </u>	
NEW YORK	NY	10019	Occupation STOCK BROKER		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	•		Name of Employer	Date (month,	Amount
TERRY HINTON			T&TWELDING	day, year)	
P.O. BOX 356				06/13/2014	1000.00
F.O. BOX 350			Transaction ID : F6.36855		
ELLISVIILLE	MS	39437	Occupation OWNER		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
RONALD HOLEC			RETIRED	day, year)	
10500 EAST LOST CANYON DRIVE				06/13/2014	2600.00
LOT 28			Transaction ID : F6.36867]	
SCOTTSDALE	ΑZ	85255	Occupation RETIRED		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
RONALD HOLEC			RETIRED	day, year)	
10500 EAST LOST CANYON DRIVE				06/13/2014	2400.00
LOT 28			Transaction ID: F6.36869		
SCOTTSDALE	ΑZ	85255	Occupation RETIRED		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
SAMUEL HUFFINES			HUFFINES AUTO DEALERSHIPS	day, year)	
2805 WATERSIDE DR				06/13/2014	2000.00
			Transaction ID : F6.36863		
PLANO	TX	75093-8806	Occupation AUTO DEALER		

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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including lo	ans) of	\$1000 or more, re	eceived within 20 days of the election.		PURA
1. NAME OF COMMITTEE IN FULL				7	15 .14.
FRIENDS OF CHRIS MCDANIEL ADDRESS (number and street) POST OFFICE BOX 125				_	15 PORT
CITY, STATE, and ZIP CODE				_	
LAUREL			MS 39441	continuation	n page
2. NAME OF CANDIDATE			3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	_
CHRISTOPHER BRIAN MCDANIEL			Senate MS 00	C00550657	
5. ISTHIS AN AMENDMENT? NO, THIS IS A	. NEW FII	LING _	YES, IT AMENDS THE NOTICE FILED ON	///////	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
GERALD KIRKE			KIRKE FINANCIAL	day, year)	
5465 MILLS CIVIC PKWY STE 400				06/13/2014	1000.00
			Transaction ID : F6.36854		
WEST DES MOINES	• 4	50000 F004	Occupation Ps. 30034	-	
	IA	50266-5321	OWNER		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month, day, year)	Amount
ALVIN NEW			SELF-EMPLOYED		
502 SOUTH KOENIGHEIM STREET				06/13/2014	1000.00
SUITE 1A			Transaction ID : F6.36859		
			Occupation D : Po.30839		
SAN ANGELO	TX	76903	RANCHER		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
MICHAEL OLCOTT			RETIRED	day, year)	
PO BOX 330427				06/13/2014	2000.00
10 50,000,27			Transaction ID : F6.36852		
		==	Occupation Po.38832	-	
FORT WORTH	TX	76163	BIOCHEMIST		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
JAMES REMINGTON			RETIRED	day, year)	
2300 CEDARFIELD PARKWAY				06/12/2014	2600.00
APT. 263			Transaction ID : F6.36847		
			Occupation	\dashv	
RICHMOND	VA_	23233-1942	RETIRED		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month, day, year)	Amount
RICHARD UIHLEIN		ļ	ULINE	uay, year,	
1396 N WAUKEGAN RD		!		06/12/2014	2600.00
		!	Transaction ID : F6.36849		
LAKE FOREST	п	60045	Occupation	7	
EARL I GILLOI	IL.	60045	CEO/OWNER		



48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

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(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more	, received within 20 days of the election.		1.57
NAME OF COMMITTEE IN FULL FRIENDS OF CHRIS MCDANIEL		7	
ADDRESS (number and street) POST OFFICE BOX 125		_	
CITY, STATE, and ZIP CODE		[
LAUREL	MS 39441	continuation	page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION N	IUMBER
CHRISTOPHER BRIAN MCDANIEL	Senate MS 00	C00550657	
5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
PATRIOT VOICES PAC		day, year)	
315 FOXTAIL LANE		06/13/2014	1000.00
	Transaction ID : F6.36856		
SPRING CITY PA 19475	Occupation		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

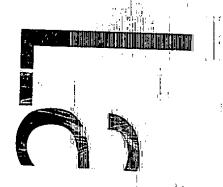
(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, relieved within 20 days of the election.

1. NAME OF COMMITTEE IN FULL FRIENDS OF CHRIS MCDANIEL		AN		
ADDRESS (number and street) POST OFFICE BOX 125		JAN		
CITY, STATE, and ZIP CODE				
LAUREL	MS 39441			
NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District	4. FEC IDENTIFICATION	NUMBER	
CHRISTOPHER BRIAN MCDANIEL	Senate MS	00 C00550657	C00550657	
IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED	DON 6,17,	<u>14</u>	
FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
BRADLEY BARR	SELF-EMPLOYED	06/16/2014	2600.0	
737 BEULAH RD		00/10/2014	2000.0	
	Transaction ID : F6.36910			
BEULAH MS 38726	Occupation FARMER			
FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
SIDNEY ARTHUR MCVEY	SELF-EMPLOYED			
11925 S 49TH W AVE		06/16/2014	2000.0	
11020 0 10111111112	Transaction ID : F6.36909			
SAPULPA OK 74066	Occupation FARMER			
FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	- Countries			
	Occupation			
. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
IGNATURE (optional) MELANIE SOJOURNER	DATE 06/17/201	Federal Electric Services 4 999 E Street, NW,	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 2046; Toll Free 800-424-9530, Local 202-694-110	

(Revised 07/2011)





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DANA K. MCCALLUM SUPERINTENDENT

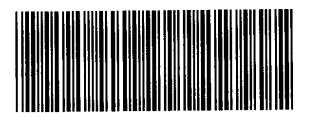
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